FORM D



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U.S. SECURITIES AND EXCHANGE COMP

Washington, D.C. 20549

OMB APPROVAL OMB NUMBER: 3235-0076

Expires: January 31, 1988

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D.

SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTIÓN

SEC USE ONLY Prefix | Serial DATE RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Zaykowski Qualified Partners, LP						
Zaykowski Qualified Partners, LP	72/020					
	LOE					
Type of Filing: New Filing Amendment						
A. BASIC IDENTIFICATION DATA						
1. Enter the information requested about the issuer						
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)						
Zaykowski Qualified Partners, LP						
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number					
24 Schermerhorn Street, Brooklyn NY 11201-4803	(Including Area Code) (718) 330-0371					
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number					
(if different from Executive Offices)	(Including Area Code)					
Same	() Same					
Brief Description of Business						
Securities Investment						
Type of Business Organization	PROCESSED					
corporation limited partnership, already formed other (please specify):	PROCESSED					
business trust limited partnership, to be formed	LANGE COS					
Month Year	JAN 6 3 2000					
Actual or Estimated Date of Incorporation or Organization: [1 1] [02] Actual	THOMSCAN					
	FINANCIAL					
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: [D][E] CN for Canada; FN for other foreign jurisdiction)	1-114MAN P					

GENERAL INSTRUCTIONS

FEDERAL:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seg, or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendment needs only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the

Filing Fee: There is no federal filing fee.

STATE:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDEN	TIFICATION DATA						
2. Enter the informati	on requested for the fo	ollowing:							
• Each promoter of the issuer, if the issuer has been organized within the past five years;									
• Each benef	ficial owner having the	e power to vote or dispose, or di	rect the vote or disposition of, 10%	or more of a class of eq	uity securities of the issuer;				
• Each execu	utive officer and direct	tor of corporate issuers and of co	orporate general and managing part	ners of partnership issue	rs; and				
Each gener	• Each general and managing partner of partnership issuers.								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General Partner				
Full Name (Last name first, if	individual)								
PRZ Holdings, LLC									
Business or Residence Addres	s (Number and Stree	t, City, State, Zip Code)							
24 Schermerhorn Street, Broo	klvn. NY 11201-480	3							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)				managing radio				
Zaykowski, Paul R.									
Business or Residence Addres	ss (Number and Stree	et, City, State, Zip Code)							
c/o PRZ Holdings, LLC, 24 S	chermerhorn Street, B	rooklyn, NY 11201-4803							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)								
PRZ Management, L.L.C.									
Business or Residence Addres	ss (Number and Stree	et, City, State, Zip Code)							
24 Schermerhorn Street, Broo	klyn, NY 11201-480	3							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Dire	ector General and/or Managing Partner				
Full Name (Last name first, it	individual)								
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Dire	ector General and/or Managing Partner				
Full Name (Last name first, it	findividual)								
Business or Residence Addre	ss (Number and Stre	et, City, State, Zip Code)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Din	ector General and/or Managing Partner				
Full Name (Last name first, i	f individual)								
			·						
Business or Residence Addre	ss (Number and Stre	et, City, State, Zip Code)							
·									

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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					B. IN	FORMA	TION .	ABOUT	OFFER	ING				
1.	Has the i	ssuer sold,	or does the	issuer inter	nd to sell, to	non-accre	dited invest	ors in this o	offering?		***********			Yes No
					Answer	also in App	endix, Col	umn 2, if fi	ling under (JLOE.				
2.	What is t	he minimu	m investme	nt that will	be accepted	d from any	individual?						.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$500,000
2										Yes №				
3.														
4.	solicitati dealer re	on of purch gistered wi	nasers in cor th the SEC	nnection wi and/or with	th sales of s a state or s	securities in	the offering the name of	g. If a pers the broker o	on to be list or dealer. If	ted is an as more than	sociated pe	rson or ager	ilar remuner nt of a broke listed are as NONE	er or
Full Nam		ne first, if i		ici, you me	iy set form	die informa	tion for the	t blokel bl	dealer only.			·	HONE	
Business	or Residen	ce Address	(Number a	and Street, (City, State,	Zip Code)								
Name of	Associated	Broker or	Dealer			· · · · · ·								
, чано от	. 1550 - 14100	. 2.0.0. 0.	544.01											
States in	Which Per	son Listed	Has Solicite	ed or Intend	ls to Solicit	Purchasers								
(Check														All States
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Nam	e (Last na	me first, if	individual)											
Business	or Resider	nce Address	s (Number a	and Street,	City, State,	Zip Code)								
			`	·	•	. ,								
Name of	Associated	Broker or	Dealer								<u></u>			
States in	Which Don	son Listad	Has Calinit	ad ar Intan	da to Calinit	Purchasers								
														□ .u.a.
(Check	[AL]	[AK]	individual ([AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	All States
	[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
Full Nam	[R1] ne (Last na	[SC] me first, if	[SD] individual)	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
	•													
Business	or Resider	nce Addres	s (Number :	and Street,	City, State,	Zip Code)								
Name of	Associated	Broker or	Dealer	 _		 								
States in	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check					[CA]	[CO]		[DE]	[DC]	[FL]		[HI]	[ID]	All States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E OF PROCEED	S
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Limited Partnership Interests	\$ <u>100,000,000</u>	\$ <u>15,000,000</u>
	Total*	\$100,000,000	\$_15,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	2	\$ <u>15,000,000</u>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.	·	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$ 0
	Printing and Engraving Costs		\$ 0
	Legal Fees	⊠	\$ 25,000
	Accounting Fees		\$ 30,000
	Engineering Fees		\$ 0
	Sales Commissions (specify finders' fees separately)		\$ 0
	Other Expenses (identify) Miscellaneous (Blue Sky fees, duplicating, courier, etc.)		\$ 5,000
	Total	_	\$ 60,000

^{*}This is a continuous offering. Consequently, the aggregate offering price could be greater or less than this amount.

		OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	
5.	b. Enter the difference between the aggregate of Question 1 and total expenses furnished in respis the "adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted gross be used for each of the purposes shown. If the an estimate and check the box to the left of the must equal the adjusted gross proceeds to the is	onse to Part C - Question 4.a. This difference sproceeds to the issuer used or proposed to amount for any purpose is not known, furnish estimate. The total of the payments listed		\$ <u>99,940,000*</u>
	4.b above.		Dayumanta ta	
			Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees		\$	□ \$
	Purchase of real estate		□ \$	□ \$
	Purchase, rental or leasing and installation of m	achinery and equipment	□ \$	□ \$
	Construction or leasing of plant buildings and f	acilities	□ \$	\$
	Acquisition of other businesses (including the variation of other businesses (including the variation of the assets or same state)	estment as described in the Issuer's	□ \$ □ \$ □ \$	□ \$ □ \$ □ \$ ⋈ \$ <u>99.940,000</u>
			S	□ \$
			□ \$ ⊠ \$ <u>99</u>	⊠\$ <u>99,940,000</u> 9,940,000
		D. FEDERAL SIGNATURE		
follow: request	uer has duly caused this notice to be signed by ng signature constitutes an undertaking by the of its staff, the information furnished by the issurint or Type)	issuer to furnish to the U.S. Securities and E er to any non-accredited investor pursuant to pa	exchange Commi ragraph (b)(2) of	ssion, upon written
	wski Qualified Partners, LP	Signature Zaylowshi Ouchfied Pa Title of Signer (Print or Type) Paul R Zaylowshi Principal of PRZ Holdings 1/16 Goneral Part	ithus	108/02
	Signer (Print or Type)	Title of Signer (Print or Type)	<u> </u>	
Paul R	Zaykowski	Principal of PRZ Holdings, LLC, General Part	ner of Issuer	

*See asterisked comment on p. 4

ATTENTION

Intentional misstatements or omissions of act constitute federal criminal violations. (See 18 U.S.C. 1001.)